

Connecticut's Official Health Insurance Marketplace

Testimony of Access Health CT Before the Connecticut General Assembly Insurance and Real Estate Committee February 24, 2015

S.B. 751 - AN ACT REQUIRING THE CONNECTICUT HEALTH INSURANCE EXCHANGE TO POST PROVIDER NETWORK INFORMATION ON ITS INTERNET WEB SITE.

Good Afternoon Senator Crisco and Representative Megna, members of the Insurance and Real Estate Committee.

My name is Jason Madrak, Chief Marketing Officer of Access Health CT, the Connecticut State Health Insurance Exchange.

Thank you for the opportunity to give testimony before your committee.

In reviewing the text of Senate Bill 751, I was surprised to see language looking to require Access Heath CT to list medical providers participating in plans sold on our site... given that this information is currently available, as well as prominently featured during the entire enrollment process. I can only assume that those crafting this bill have not been to our site, or have not gone beyond the initial home page where individuals can get started with the enrollment process. With that said, I'd like to call your attention to the features which are currently available, and thus make this bill unnecessary.

Once a person selects either individual or family coverage and puts in certain household information (such as age and county of residence) they will reach a page which lists the plans from which they may be able to choose from. Visitors to this page are first greeted by a large, prominent, yellow box at the top of the screen which underscores the importance of checking the provider directory for any plan an individual may be interested in. It even goes on to stress that for added peace of mind, individuals may want to take the added step of calling preferred doctors directly to see if they are in a plan which they are considering.

As individuals look at displayed plan options, there is a large clickable box below each and every plan listed which physically says "check if your doctor is in network". If

consumers click this box, they are immediately taken, through another window, to the provider directory look up tool for the carrier they selected. Such look-up tools will already be prefilled with whatever information related to that specific plan might be needed in order to perform an accurate search. For example, if an individual is looking at a ConnectiCare Benefits Inc. plan, and click the "check doctors" button, they are taken to the Connecticare provider look up tool. This applies to all the other carrier's plans as well (Anthem, Healthy CT and United). Here consumers can search for providers using a multitude of options, including by name, specialty or geography, just to name a few.

We fully realize the importance of not only having robust provider networks for plans sold on the exchange, but also ensuring consumers can see what doctors specifically are included in their plans. With provider availability being one of the most important evaluation criteria consumers have when selecting a plan, we took great care to feature provider look up tools so prominently on our site.

I'm not sure what the intent of Senate Bill 751 was, but I hope that with an understanding of the provider look up functionality described above already in place, you'll agree that Senate Bill 751 is unnecessary.